



Inpatient Services

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'Open Staff Privileges' Revised

Welfare and Institutions Code (W & I Code) Section 14087.28 prohibits hospitals which participate in the Medi-Cal Selective Provider Contracting Program from denying medical staff membership or clinical privileges on any qualifications other than established professional and ethical criteria, applied uniformly to all staff applicants and members. Recent W & I Code changes revised the meaning of "open staff privileges."

Section 35 of Chapter 788, Statutes of 2004 amended the code to read:

- Section 14087.28(a). A hospital contracting with the Medi-Cal program pursuant to this chapter shall not deny medical staff membership or clinical privileges for reasons other than a physician's individual qualifications as determined by professional and ethical criteria, uniformly applied to all medical staff applicants and members. Determination of medical staff membership or clinical privileges shall not be made upon the basis of any of the following:
 - (1) The existence of a contract with the hospital or with others.
 - (2) Membership in, or affiliation with, any society, medical group, or teaching facility or upon the basis of any criteria lacking professional justification, such as any basis listed in subdivision (a) of Section 12940 of the *Government Code*, as those bases are defined in Sections 12926 and 12926.1 of the *Government Code*, except as otherwise provided in Section 12940 of the *Government Code*.
- Section 14087.28(b). The special negotiator may authorize a contracting hospital to impose reasonable limitations on the granting of medical staff membership or clinical privileges to permit an exclusive contract for the provision of pathology, radiology, and anesthesiology services, except for consulting services requested by the admitting physician.

This information is reflected on manual replacement page [cont ip 17](#) (Part 2).

ICD-9 Codes Added for Inpatient Liver and Bone Marrow Transplants

Effective for dates of service on or after November 1, 2005, the following ICD-9 procedure codes may justify enhanced hospital contract rates for transplant services.

<u>ICD-9 Code</u>	<u>Description</u>
41.04	Autologous hematopoietic stem cell transplant without purging
41.05	Allogenic hematopoietic stem cell transplant without purging
41.07	Autologous hematopoietic stem cell transplant with purging
41.08	Allogenic hematopoietic stem cell transplant with purging
50.51	Auxiliary liver transplant

The updated information is reflected on manual replacement page [transplant 5](#) (Part 2).

2005 CPT-4/HCPCS Codes and Modifiers Update

Effective November 1, 2005, the following code and modifier conversions are taking place due to annual HCPCS updates and/or mandated HIPAA conversions:

- Conversion to the 2005 CPT-4 and HCPCS Level II codes
- Policy updates related to the 2005 CPT-4 and HCPCS Level II code updates
- ICD-9 procedure code update for inpatient providers
- HIPAA-mandated conversion of hearing aid and accessory codes and modifiers
- HIPAA-mandated conversion of interim modifiers
- HIPAA-mandated conversion of respiratory care practitioner codes

Policy for all updates was announced in the September 2005 *Medi-Cal Update*. Provider manual updates are included in this month's *Medi-Cal Update*.

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Remove and replace:

- appeal form 1/2 **, 7/8 **
- cal child ser 7/8 *
- cif sp ip 3 thru 8 *
- cont ip 1/2 **, 5/6 **, 17/18
- hcpcs iii 3/4 *
- hyst 3/4 *
- inp ment 1/2 **
- inp ment pln 7/8 **
- mcs manag 1/2 **
- medi cr ip 7 thru 10 *, 13 thru 18 *
- medi cr ip ex 1 thru 17 *
- medne 7/8 *
- ster 19/20 *
- tar and non cd1 5 *
- tar and non cd2 9/10 *
- tar and non cd3 3 thru 6 *
- tar and non cd4 3 thru 7 *
- tar and non cd5 1/2 *, 7/8 *
- tar and non cd6 1 thru 4 *
- tar and non cd7 1 thru 3 *
- tar and non cd8 1/2 *
- tar and non cd9 1 thru 7 *
- tar crit nf 7/8 **
- tar dis cod 3/4 *
- tar field 1/2 **
- transplant 5/6, 9/10 **

* Pages updated due to ongoing provider manual revisions.

** Pages updated due to ongoing provider manual revisions. County Medical Services Program (CMSP) providers should remove these pages but retain them in the Appendix of their provider manual for future reference.